

# Hospital Newsletter

September 2004



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## Hospital Bioterrorism Capacity and Readiness for CBRNE

The Health Resources and Services Administration (HRSA) cooperative agreement under the Hospital Bioterrorism Preparedness Program (HBPP) provided \$10,270,929.00 for Hospital BT Preparedness Planning for 2004-2005. Of that amount, approximately \$9,300,000.00 will be made directly available to hospitals to spend on the hospitals needs that are coordinated with their district plan. As last year, the money will be distributed based on the hospital's reported 2003 ED visits. The money is to be used by the hospital to prepare infrastructure for meeting the Chemical, Biological, Radiological, Nuclear and Explosive Device (CBRNE) threats from Terrorists.

Contracts are being distributed in September of this year to 145 eligible Acute Care Hospitals and the 2 VA hospitals. There are 22 deliverables for this year. They include more definitive information on hospital bed surge capacity, isolation surge capacity, health care personnel surge, pharmaceutical caches, personnel protective equipment and decontamination, mental health, communication & IT, EMS, laboratories surveillance and patient tracking education and preparedness training, and terrorism preparedness Exercises. Also included is a survey on radiological response and the budget for emergency preparedness equipment.

Completion of these deliverables will be required before the hospital may return the voucher for payment of their share of the funds.

## New Hospital Consumer Report

The ISDH is working on the format for a new hospital consumer report. Once completed, the report will be available on the ISDH Web site. The purpose of the report is to provide quality of care and compliance information to the public.

Questions on this initiative can be obtained by contacting Terry Whitson, JD, Assistant Commissioner at 317/233-7621.

The new format will use information within the ISDH databases. You are reminded to notify Ann Hamel of updated information on names of the CEO, phone numbers, and locations as soon as possible.

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## Other Regulatory News

U.S. Office of Civil Rights has revised its Medicare Certification Packet that hospitals will need for change of ownership or new certification. Needed forms and contact information for Clearance for Medicare Provider Certification can be found at <http://www.hhs.gov/ocr/crclearance.html>. ISDH staff has also included these new materials in the ISDH licensure and certification packet.

ISDH has revised the *Advance Directives: Your Right to Decide*. The current version is posted at <http://www.in.gov/isdh/regsvcs/acc/advance/advanceddirectives.pdf>. This document is also available in Spanish.

The CMS Interpretative Guidelines for hospitals (general acute, rehabilitation/psychiatric, swing bed, critical access, and EMTLA) is now posted at <http://www.in.gov/isdh/regsvcs/acc/lawrules/index.htm>.

On an annual basis, ISDH surveyors have requested the administrator to complete the Hospital Request for Certification in the Medicare/Medicaid Program (Form CMS-1514 [6-00]. This information is used for many purposes and will be incorporated into a new state form (State Form 51865 [8-04]), based on CMS decision to discontinue use of the federal form.

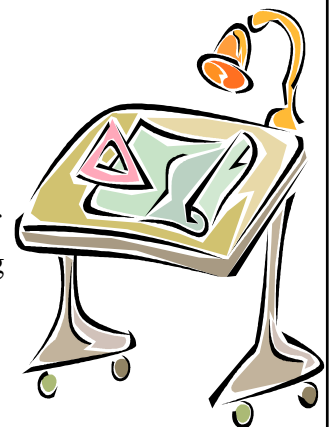
## Distinct Part Units for Critical Access Hospitals

Based on a 4/23/04 CMS announcement, Critical Access Hospitals (CAHs) may establish psychiatric and rehabilitation distinct part units effective for cost reporting periods beginning on or after October 1, 2004. The beds for each unit are limited to 10 beds, and will be excluded from the 25 total bed count limit for CAHs. The CMS announcement can be found at [http://www.cms.hhs.gov/manuals/pm\\_trans/R144CP.pdf](http://www.cms.hhs.gov/manuals/pm_trans/R144CP.pdf) and the conditions of participation at [http://www.access.gpo.gov/nara/cfr/waisidx\\_00/42cfr412\\_00.html](http://www.access.gpo.gov/nara/cfr/waisidx_00/42cfr412_00.html).

There are 23 critical access hospitals in Indiana. Interested hospitals should request a psychiatric and/or rehabilitation packet from the ISDH by fax at 317/233-7157. Contact Ms. Ann Hamel for further information at 317/233-7487.

## New ISDH Rule Promulgation

On September 8, 2004, the ISDH Executive Board provided its final adoption to the revision of the plan review rules (410 IAC 6-12). The rule is posted at <http://www.in.gov/legislative/register/Vol27/10Jul/08P410030276.PDF>. Under this proposed rule, hospitals will be charged for needed plan review at a flat rate of \$550 for a new hospital or hospital addition and \$300 for remodeling of an existing hospital under IC 16-21-2 and 410 IAC 15. The proposed final rules have been forward to the Office of the Attorney General and the Governor for approval.



## **PHYSICIAN/HOSPITAL REPORTING/ DOCUMENTATION OF HIV TESTING IN PREGNANT WOMEN**

Revisions in the law that addresses mandatory testing of individuals with communicable disease (IC 16-41-6) has dictated changes in the documentation of HIV testing in pregnant women.

Section 9 states that the state department shall require, on the confidential part of each birth certificate and stillbirth certificate retained by the state

- ♦ information indicating whether a standard licensed diagnostic test for HIV was performed on the woman,
- ♦ the date of the specimen whether the test was performed during pregnancy or at the time of delivery
- ♦ if a test was not performed, the reason the test was not performed.

Section 12 states that the state department shall provide that an HIV test history and assessment form from the patient's medical records or an interview with the patient must be filled out. The state department shall develop the form to determine if:

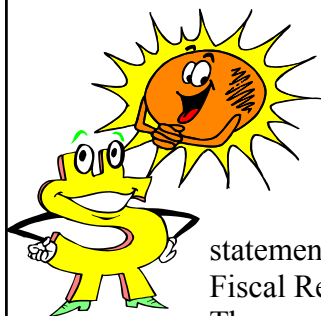
- ♦ the patient is HIV positive and has been informed; or
- ♦ the patient was tested during the current pregnancy and tested negative or was not tested during the current pregnancy and the HIV status is unknown.

This new form, required by the law, must identify what special support or assistance for continued medical care the patient might need as a result of a positive test. The law specifies that a copy of the form must be:

- ♦ kept in the patient's medical file
- ♦ kept in the baby's medical file
- ♦ given to the doctor in the hospital designated to administer the newborn HIV testing program.

The revision of this section of the act also requires that the state department evaluate statewide prenatal testing of pregnant women in Indiana. Therefore, the information must be available to ISDH.

Taking into consideration the myriad of forms physicians already must complete and their busy schedules, ISDH is in the process of preparing a form to capture all of this information. Positive input would be welcomed from those who will be affected by this form. It would be most helpful to the continuity of the process, if each hospital administrator would designate a nurse in the OB department to be a liaison between that hospital and Terry Jackson RN BS, HIV Perinatal Nurse Consultant at ISDH. It would be much appreciated if you would email the name of your designee to [tjackson@isdh.state.in.us](mailto:tjackson@isdh.state.in.us) or call her at 317-233-7743, if you have not already spoken to her. Thank you for doing your part to help our newest Hoosiers start their lives free from becoming HIV infected due to perinatal exposure.



## Hospital Disclosure Act Data Update

Under the Hospital Disclosure Act, each hospital will provide financial reports to ISDH on an annual basis. The request to file a copy of the audited financial statement, Medicare Cost Report, and an electronic Hospital Fiscal Report for fiscal year **2004** is included in this mailing. The requirements are unchanged from last year. The packet includes the format for the 2004 financial reporting. The instruction, diskette, and forms should be forwarded to the Chief Financial Officer. This information will not be due until the end of fiscal year 2004.

ISDH has now received the majority of the Fiscal Year **2003** Fiscal reports. Your hospital's current filing status and copy of the 2003 fiscal and service report for final edit are enclosed in this packet. Copies of all filed reports can be obtained by calling 317/233-7541.

## Goals of Identical Common Performance Measures By CMS and JCAHO

The Joint Commission on Accreditation of Healthcare Organizations and the Centers for Medicare and Medicaid Services (CMS) announced on September 16, 2004 the signing of an agreement to work together in completely aligning current and future common Hospital Quality Measures in their condition-specific performance measure sets. The current Hospital Quality Measures are included in the Joint Commission's ORYX® Core Measures and CMS' 7th Scope of Work Quality of Care Measures on heart attack, heart failure, pneumonia and surgical infection prevention. The public availability of identical core measures will reduce data reporting and permit user comparison of hospital performance at the state and national levels.

## 2004 Accreditation or State Survey

Hospitals that have their JCAHO/AOA accreditation survey in calendar year 2004 are reminded to send a copy of the accreditation survey report to ISDH, if the hospital desires for ISDH to accept that survey in lieu of the annual licensure survey for 2004. Please send the accreditation survey to Mary Azbill.

### Telephone Directory by Topic

#### Hospital Program & Procedure Changes

**Ann Hamel**  
**317.233.7487**

**Plan Review**  
**Wes Anderson**  
**317.233.7882**

**Data Reporting**  
**Tom Reed**  
**317.233.7541**

### Hospital Information on ISDH Web Site

- Directory (with quarterly updates)
- Laws/Rules/Regulations (USA & IN)
- Licensing Form
- Reports
- Links to various organizations

### The Hospital Newsletter

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